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|---|---|--|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Attorney Docket Number 5041.001 | |
| | First Named Inventor Alberto DiBella | |
| | COMPLETE IF KNOWN | |
| | Application Number / | |
| | Filing Date | |
| | Art Unit | |
| Examiner Name | | |

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VORAXIAL FILTRATION SYSTEM WITH SELF-CLEANING
AUXILIARY FILTRATION APPARATUS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
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| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0851-0032

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

Alberto

Family Name

or Surname

DiBella

Inventor's
Signature

Alberto DiBella

Date

11-13-03

Residence: City

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Citizenship

Mailing Address

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US

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle (if any))

Michael

Family Name

or Surname

Anthony

Inventor's
Signature

[Signature]

Date

11-13-03

Residence: City

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State

FL

Country

USA

Citizenship

US

Mailing Address

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Coral Springs

State

FL

ZIP

33065

Country

US

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.FEEAS
SIGN
DATE

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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number

Filing Date

First Named Inventor

Alberto DiBella

Title

Voraxial filtration

Group Art Unit

Examiner Name

Attorney Docket Number

5041.001

I hereby appoint:

☒ Practitioners at Customer Number

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OR

☐ Practitioner(s) named below:

| Name | Registration Number |
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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

ALBERTO DIBELLA

Signature

Alberto D. DiBella

Date

11-13-03

**PLEASE SIGN
& DATE**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

| | |
|------------------------|---------------------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Alberto DiBella |
| Title | Voraxial filtration |
| Group Art Unit | |
| Examiner Name | |
| Attorney Docket Number | 5041.001 |

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I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

| | | |
|-----------|---|-----------------------------------|
| Name | MICHAEL M. ANTHONY | PLEASE SIGN & DATE |
| Signature |  | |
| Date | 11-13-03 | |

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